PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number 09994226

CLAIMS AS FILED - PART I													
			(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			9					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			/3 minus 20=		* 6			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 m	inus 3 =	*6			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PR			RESENT			4		+140=			+280=	280 -	
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	•			OR		1020-	
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	,,,	
		(Column 1)	The state of the s			(Column 3))_	SMALL	ENTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	o a	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	-	
BEST AVAILABLE COPY								TOTAL		ΩD	TOTAL		
			ADDIT. FEE		J • · ·	ADDIT. FEE							
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T CL AIM	=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF MI	JLI IPLE DE	PENDEN	I CLAIM			+140=		OR	+280=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
)_											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***]=		X42=		OR	X84=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIN		_						
	If the entry in colu	mn 1 is less than t	he entry in col	lumn 2 writ	e "0" in c	olumo 3		+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE													
		nber Previously Pa						und in the ap	propriate bo	x in co	olumn 1.		